

SOUTH DAKOTA DEPARTMENT OF AGRICULTURE

AGRICULTURAL SERVICES DIVISION

523 East Capitol Avenue Pierre, SD 57501

Phone: 605.773.4432 Fax: 605.773.3481

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JUL 1 6 2018

Department of Agriculture

	Pesticide Dan	nage Complaint I	orm Div.	of Ag Services	
1. Claimant's Name:	b) (6)	Phone	(b) (6) Number:		
Address:		(b) (6		v	
2. County:(b) (6)	Legal Description of	Damage Property:			20.016
	Herbicide / fungio		1	oss trees)	eople
	Peach tree app	chemicals. H	umans expos		3
5. Type of Application	: Ground (X) Aerial	() and sic	to hospital	P	
6. Facts of Application	Date: 7/9/	Time (Approximate): 5:		
Weather Conditions 93 degrees	s (i.e. wind direction, wind spe blowing wind from	eed, temperature, relative South (SE	e humidity): 305/109 to 10	12 mph: 55%) Hite
7. Legal description of	crop on which application of	pesticide was made	?) 	(b) (6) 170 Mil	aria
8. Owner of crop on w	hich application was made:	(b) (6)			
9. Person applying pe	sticides (if known): 500	meast rum	145 Coop		
10. Have you talked to	the person that applied the	pesticides? Yes (X) No ()		
If so, give results:	Applicator con	ed to fax o	nix Ticket	015766	
11. Witnesses, if any:	,	a r was the second			
Number (b) (6)	Name	Address		Phone	
		,			
12. Additional Comme OF Chemic did Not Walking De Date: 7/12		July Propie	se correct 10ctor. Ap standing an 10t stop to	mix plicator d check wi	ind action
	ketch of damage on page two of	_ Signature: f this form.		bet	OIN

Office - White

Firm - Canary

Inspector - Pink

Applicator - Goldenrod

Pesticide Damage Complaint Form Continued Date: 7/12/18 1. Claimant's Name: Signature: 2. Sketch location of damaged area, indicating section, location and size of area alleged to be damaged. RECEIVE JUL 1 6 2018 Department of Agricultur Div. of Ag Services West East South Additional comments: and includes rented pas

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